

# PLUMBING PERMIT APPLICATION

## TOWN OF LONGBOAT KEY PLANNING, ZONING AND BUILDING DEPARTMENT

501 Bay Isles Road  
Longboat Key, FL 34228  
Phone: 941-316-1966 FAX: 941-316-1970

### OFFICE USE ONLY

Applic #: \_\_\_\_\_ PERMIT # PP: \_\_\_\_\_  
Appvd By: \_\_\_\_\_ Date: \_\_\_\_\_  
Fees Due: \$ \_\_\_\_\_  
Receipt #: \_\_\_\_\_ Issued: \_\_\_\_\_

COMPLETE APPLICATION IN INK OR TYPE

REVIEWED UNDER 2007 FLORIDA BUILDING CODE AND STATE STATUTES

### JOB SITE

PROJECT/COMPLEX NAME (IF ANY): \_\_\_\_\_  
STREET ADDRESS: \_\_\_\_\_ UNIT #: \_\_\_\_\_  
COUNTY:  MANATEE  SARASOTA LOT (S) #: \_\_\_\_\_ PARCEL #: \_\_\_\_\_

### CONTRACTUAL DESCRIPTION -- Your contract for work is as a:

- 1)  **SUBCONTRACTOR UNDER A BUILDING CONTRACTOR NAMED** \_\_\_\_\_  
Bldg. Permit is:  Pending approval  Issued permit # BP.: \_\_\_\_\_
- 2)  **INDEPENDENT WORK**, unrelated to other construction or permit: Amount of contract: \$ \_\_\_\_\_  
If a FEMA non-conforming structure, total improvement cost from FEMA forms attached: \$ \_\_\_\_\_

### WORK DESCRIPTION – Identify all work / areas for which you will take responsibility under this permit

NEW CONSTRUCTION:  Single Family  Multi-Family  Commercial  \_\_\_\_\_

NEW ADDITION TO EXISTING:  #\_\_\_\_ Full Bath(s)  #\_\_\_\_ 1/2 Bath(s)  Kitchen  
Addition of  Laundry  Bar Sink  \_\_\_\_\_

EXISTING STRUCTURE:  #\_\_\_\_ Full Bath(s)  #\_\_\_\_ 1/2 Bath(s)  Kitchen  Convert 1/2 to Full bath  
Relocate or new  Laundry  Bar Sink  \_\_\_\_\_

REMODEL EXISTING:  #\_\_\_\_ Full Bath(s)  #\_\_\_\_ 1/2 Bath(s)  Kitchen  Swap shower/bathtub  
 Laundry  Bar Sink  \_\_\_\_\_

ACCESSORY STRUCTURES:  Run water to dock/seawall  Add/alter outside hose bib  Backflow Prevention (1 inspect)  
 Pump for \_\_\_\_\_

OTHER WORK  Manufactured Home Replacement  Re-Plump House  Pool Spa Plumbing

COMMENTS: \_\_\_\_\_

### PLUMBING PERMIT APPLICANT PROPERTY OWNER IS APPLICANT

NOTE: Registered Contractor must be licensed in the county project is located

LICENSES: STATE #: \_\_\_\_\_ MANATEE CO: \_\_\_\_\_ SARASOTA CO: \_\_\_\_\_  
APPLICANT/QUALIFIER NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_  
COMPANY NAME: \_\_\_\_\_ FAX: \_\_\_\_\_  
STREET: \_\_\_\_\_ OTHER: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
BONDING COMPANY: \_\_\_\_\_  
BONDING COMPANY ADDRESS: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

### PROPERTY OWNER (required)

NAME AS ON PROPERTY RECORD: \_\_\_\_\_ PHONE: \_\_\_\_\_  
COMPANY NAME: \_\_\_\_\_ FAX: \_\_\_\_\_  
STREET: \_\_\_\_\_ OTHER: \_\_\_\_\_  
CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_  
Fee Simple Titleholder's Name & Address: \_\_\_\_\_  
(If other than Property Owner): \_\_\_\_\_  
Mortgage Lender's Name & Address: \_\_\_\_\_

### TENANT (commercial projects ONLY)

BUSINESS NAME: \_\_\_\_\_ IS THIS A NEW TENANT  YES  NO  
BUSINESS OWNER'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_  
IF NEW TENANT, WHAT WAS PRIOR TENANT/BUSINESS NAME? \_\_\_\_\_

**FEES:**

ADDED FIXTURE COUNT	
Toilets	.....
Urinals	.....
Bidets	.....
Lavatories	.....
Bath tubs	.....
Showers	.....
Jacuzzi	.....
Spas	.....
Kitchen Sinks	.....
Garbage disposals	.....
Dish washers	.....
Washing Machines	.....
Laundry tubs	.....
Slop sinks	.....
Water heaters	.....
Solar heater panels	.....
Drinking fountains	.....
Soda fountain drain	.....
Bar drains	.....
Roof drains	.....
Floor drains	.....
Sand traps	.....
Grease traps	.....
Water pumps	.....
Total	.....

CALCULATION		FEE
<b>PLUMBING FIXTURES (total at bottom left)</b>		
401	first 20..#fixtures _____ X	\$ 7.25 = _____
402	over 20 ..#fixtures _____ X	\$ 5.75 = _____
<b>BUILDING SEWERS</b>		
403	4-INCH & NOT OVER 50 FT LONG (beyond 5 ft from structure)	\$20.00 = _____
404	EACH ADDITIONAL 50 FT. # 50 ft. sections _____ X	\$10.00 = _____
405	LARGER SEWERS: each 100 ft section or fraction thereof / per inch diameter _____ X _____ X # sections in. diameter	\$10.85 = _____
406	LAWN SPRINKLER/IRRIGATION	\$15.00 = _____
407	WATER DRAINAGE, WASTE or VENT PIPING repair or alteration	\$21.50 = _____
408	WATER SERVICE: New Construction	\$36.00 = _____
409	MISCELLANEOUS: _____ fee set by PZB Dept. = _____	= _____
411	SEPTIC TANKS, GREASE TRAPS, OIL SEPARATORS, TRAPS, ETC. in excess of 500 gals	\$36.00 = _____
412	TRAILER CONNECTION	\$36.00 = _____
413	PERMIT ISSUANCE, per bldg	\$50.00 = \$50.00
<b>TOTAL FEE:</b>		_____
<b>410</b>	<b>Reinspection fee; per inspection = \$50.00</b>	

**OWNER AFFIDAVIT Applicable only to owners acting as their own contractor**

I am applying for a construction permit pursuant to the owner/builder exemption set forth in Florida Statutes Section 489.103 and Florida Building Code 104.4.4.

**Florida Statutes Section 489.103 DISCLOSURE STATEMENT** State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor with certain restrictions even though you do not have a license. You must provide direct, onsite supervision of the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building, provided your costs do not exceed \$75,000. The building or residence must be for your own use or occupancy. It may not be built or substantially improved for sale or lease. If you sell or lease a building you have built or substantially improved yourself within 1 year after the construction is complete, the law will presume that you built or substantially improved it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person to act as your contractor or to supervise people working on your building. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances. You may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on your building who is not licensed must work under your direct supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

**Florida Building Code 104.4.4 ASBESTOS ABATEMENT DISCLOSURE STATEMENT:** State law requires asbestos abatement to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own asbestos abatement contractor even though you do not have a license. You must supervise the construction yourself. You may move, remove or dispose of asbestos-containing materials on a residential building where you occupy the building and the building is not for sale or lease, or the building is a farm outbuilding on your property. If you sell or lease such building within 1 year after the asbestos abatement is complete, the law will presume that you intended to sell or lease the property at the time the work was done, which is a violation of this exemption. You may not hire an unlicensed person as your contractor. Your work must be done according to all local, state and federal laws and regulations which apply to asbestos abatement projects. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances.

Owner's Initials: \_\_\_\_\_

**WARNING TO OWNER:** YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT

**APPLICANT SIGNATURE, (contractor or owner-acting-as-own-contractor) -- no agents**

**Applicant's Affidavit:** I certify that all the foregoing information is accurate and complete. I further certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed in accordance with the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for applicable ELECTRICAL WORK, PLUMBING, GAS, SIGNS, WELLS, POOLS, FURNACES, HEATERS, TANK, and AIR CONDITIONS, etc.

**Note:** If owner is applying for this permit as a contractor under Fla. Statute 489.103, said owner must personally appear at the Town Planning, Zoning and Building Department to sign this application form and initial the above Owner Affidavit Form.

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

**NOTARY of the State of Florida** County of \_\_\_\_\_  
The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_,  
by \_\_\_\_\_ who is personally known to me or who has produced \_\_\_\_\_ as identification.

SEAL:

Signature of Notary Public, State of Florida